-								1.	Application or Docket Number				
Ĺ	PATENT	RD			-								
Effective October 1, 2003								10762726					
CLAIMS AS FILED - PART I													
(Column 1) (Column 2)												ENTITY	
TO	OTAL CLAIMS		4,					RATE	FEE		RATE	FEE ·	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	Basic fee	770.00	
TOTAL CHARGEABLE CLAIMS			41_minus 20=		:21			XS 9=	189.0	OR	X\$18=		
INDEPENDENT CLAIMS			8 _ minus 3 =		. 7			X43=	918.1	OR	X86=	•	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
• If the difference in column 1 is less than zero, enter "0" in column 2						Ł	TOTAL	789.0	ЮR	TOTAL			
CLAIMS AS AMENDED - PART II									7	_	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENTA	7-6-04	CLAIMS REMAINING 'AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 16	Minus	-	4)	- /		XS 9=		OR	X\$18=		
	Independent	• 3	Minus		8	= /		X43=		OR	X86≖		
L	FIRST PRESE	NTATION OF MI	SULTIPLE DEPENDENT CLAIM				I	+145=		OR	+290=		
							L	TOTAL		OR	TOTAL		
10/25/04 (Column 1) (Column 2) (Column 3)										,	ADDIT. FEE		
	100104	(Column 1)		(Colum		(Column 3)	1		ADDI-	1 1		ADDI-	
AMENOMENT B		REMAINING AFTER		PREVIO	USLY	PRESENT EXTPA		RATE	TIONAL		RATE	TIONAL	
	Total	- 26	Minus	- 4	T	=·		XS 9±		OR	X\$18=		
	Incependent	· 2	Minus	-8		•)		X43=		OR	X86≠		
6	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
•								TOTAL			TOTAL		
								DDIT. FEE		OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minjus	••		•	Γ	X\$ 9=		OR	X\$18=		
	Independent		Minus	•••		•	,	X43=			X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 ;		OR			
+145= the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
•• ;	I the 'Highest Nu	mber Previously Pa	id For IN TH	IS SPACE IS	less that	n 20, enter "20."	A	TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE		
-	If the "Highest Nu The "Highest Non	imber Previously Painber Previously Pai	uid For' IN TH d For' (Total o	IS SPACE is is Independe	iless tha nt) is the	n 3, enter "3." highest number			propriate box	in col	umo 1,		